

**PETITION FOR EXTENSION OF TIME  
UNDER 37 CFR 1.136(a)**

**FY 2009**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Application Number	10/577,132	Filing Date	August 28, 2006
For	PLACENTAL-BLOOD EXTRACTION DEVICE		
Art Unit	3761	Examiner Name	Susan Shan SU

**This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.**

**The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):**

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130.00	\$65.00	_____
<input type="checkbox"/> Two month (37 CFR 1.17(a)(2))	\$490.00	\$245.00	_____
<input type="checkbox"/> Three month (37 CFR 1.17(a)(3))	\$1110.00	\$555.00	_____
<input type="checkbox"/> Four month (37 CFR 1.17(a)(4))	\$1730.00	\$865.00	_____
<input checked="" type="checkbox"/> Five month (37 CFR 1.17(a)(5))	\$2350.00	\$1175.00	\$1,175.00
<input type="checkbox"/> Previous Payment Amount	Date Submitted _____		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input checked="" type="checkbox"/> Payment by credit card.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees, <b>except for the Issue Fee and the Publication Fee</b> , or credit any overpayment, to Deposit Account Number 19-4880.			

I am the

- applicant/inventor
- assignee of record of the entire interest. See 37 CFR 3.71.
- Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- attorney or agent of record. Registration Number 59,561
- attorney or agent under 37 CFR 1.34.
- Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

WASHINGTON OFFICE

**23373**

CUSTOMER NUMBER

/Dion R. Ferguson/  
Signature

November 5, 2010  
Date

Dion R. Ferguson  
Typed or printed name

(202) 293-7060  
Telephone Number

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input checked="" type="checkbox"/> Total of <u>1</u> form is submitted.
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